

RECEIVED
CENTRAL FAX CENTER
JAN 04 2005

HEDMAN & COSTIGAN, P.C.
ATTORNEYS AT LAW

1185 AVENUE OF THE AMERICAS
NEW YORK, NEW YORK 10036-2646

JAMES V. COSTIGAN
KENNETH F. FLOREK
ALAN B. CLEMENT
MARTIN P. ENDRES
KATHLEEN A. COSTIGAN
JOHN F. VOLPE
KATHARINE G. LOVING
NICHOLAS P. CHIARA
PETER J. FALLON

EDWARD A. HEDMAN
1927-2004

TELEPHONE
(212) 302-8989

TELECOPIER
(212) 302-8998

E-MAIL
mail@hgopatent.com

URL: <http://www.hgopatent.com>

TELECOPIER TRANSMISSION

TO: Examiner Robin Annette Hylton FAX NO.: (703) 872-9306
FROM: James V. Costigan
TOTAL NO. OF PAGES INCLUDING THIS COVER SHEET: 2
DATE: January 4, 2005 CHARGE: 1011-326

RE: Serial No. 09/890,035

(IF THERE ARE ANY PROBLEMS REGARDING THIS TRANSMISSION,
PLEASE CALL (212) 302-8989, EXT. 40 OR 41)

CONFIDENTIAL

THE INFORMATION CONTAINED IN THIS FACSIMILE IS CONFIDENTIAL AND MAY BE SUBJECT
TO THE ATTORNEY-CLIENT PRIVILEGE OR ATTORNEY WORK PRODUCT EXCLUSION.

THIS FACSIMILE IS ONLY INTENDED FOR THE DESIGNATED RECIPIENT(S). ANY RECIPIENT OTHER
THAN THE DESIGNATED RECIPIENT(S) IS HEREBY NOTIFIED THAT ANY DISCLOSURE OR USE OF THE
INFORMATION IS UNAUTHORIZED AND PROHIBITED. IF YOU HAVE RECEIVED THIS FACSIMILE IN
ERROR, PLEASE NOTIFY: HEDMAN & COSTIGAN, P.C. BY TELEPHONE AT (212) 302-8989

REMARKS: [☐ Urgent] [☐ For Your Review/Comments] [☐ Reply ASAP] [☐ FYI]
[☐ Per Your Request Original] [☐ will / [☐ will not follow

Enclosed is the Petition for Extension of Time for the above-identified Serial Number.

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United
States Patent & Trademark Office, Fax No. (703) 872-9306 on January 4, 2005.


Glenda Carrasquillo

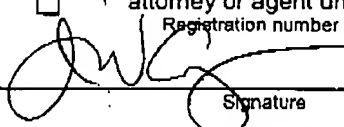
JAN 04 2005

PTO/SB/22 (10-04)

Approved for use through 07/31/2008. OMB 0551-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 1011-326	
Application Number 09/890,035		Filed July 26, 2001	
For Cosmetic Product Container and Method for Making It			
Art Unit 3727		Examiner Hylton, Robin Annette	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215	\$ 225.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040	\$ _____
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-1540</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>25,669</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 Signature		January 4, 2005 Date	
James V. Costigan Typed or printed name		(212) 302-8989 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☒ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.